PTO/SB/08A (10-01)

Approved for use through 10/31/2002. OMB 0651-4031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB

Substitute for form 1449A/PTO			APTO	Complete if Known		
IN	INFORMATION DISCLOSURE		DISCI OSURE	Application Number	09/540,843	
STATEMENT BY APPLICANT				Filing Date	March 31, 2000	
			, and a second	First Named Inventor	Gilchrest et al.	
				Group Art Unit	1635	
(nec as want spects as necessary)		(ccessary)	Examiner Name	B. A Whiteman		
Sheet	1	of	1	Attorney Docket Number	06225.0003.CPUS02	

U.S. PATENT DOCUMENTS						
Examiner	Cite	Document Number	Publication Date	Name of Patentee or	Pages, Columns, Lines, Where Relevant Passagus or Relevant Figures Appear	
Initials*	No. '	Number - Kind Code 2 (if known)	MM-DD-YYYY	Applicant of Cited Document		

FOREIGN PATENT DOCUMENTS							
		Foreign Patent Document			Pages, Columns, Lines, Where Relevant		
Examiner Intitals*	Cite No.	Country Code ' Number ' Kind Code ' (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Passages or Relevant Figures Appear	₩.	
BV	Bl	WO 99/03507	01-28-1999	Iverson			
			,				

Examiner Initials*	Cite No.	OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENT. Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher city and/or country where published	S T²

<u> </u>			
Examiner	h -0	Date	71525611
Signature	Dwilde	Considered	21 30104

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw time through charlon if not in conformance and not

*EXAMNER: Initial if reference considered, whether of not citation is in conformance with MFEP UP. Draw her through citation if not in conformance and not considered, include copy of this form with next communication on applicant.

*Applicant's unique citation designation number (optional). *See Kinds codes of USPTO Facial Documents as www.uspto.gov or MPEP 901.04. *Enter Office that issued the document, by the two-letter code (WIPO Standard ST. 3). *For Impanese patent document, use indication of the year of the reign of the Emperor Institution procede the serial number of the patent document. *Kind of document by the appropriate symbols as indicated on the document winder WIPO Standard ST. 16 if postable. *Applicant is to place a check many here if Empitable language Translation is attached.

Burden House Statement: This form is estimated to take 2.0 bours to complete. There will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231.

DO NOT SEND PEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

02/25/2004 KTURNER 00000001 083038 09540843

01 FC:1806

180.00 DA